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EDITORIAL DEBATE:

The impact of Brexit on nursing and health services

Peter Griffiths & Ian Norman

In this issue of the *International Journal of Nursing Studies* we feature two editorials on the decision by the United Kingdom to leave the European Union (EU), one by McKee (2017) and the other by McCrae (2017), which present very different perspectives on the impact and implications of this so called “Brexit” for nursing and healthcare in the UK. The editorials illustrate the strength of feelings and ongoing debate that exists within the UK as arguments continue between so called “leavers” and “remainers”, as those who supported or opposed the vote to leave are commonly referred to.

Although the issue dominates British politics, the majority of our readers around the world might reasonably ask why the issue of Britain leaving the EU should feature in the *International Journal of Nursing Studies*? In part, we believe, because Brexit may have consequences for nursing and healthcare which are felt well beyond the UK, by European countries generally and possibly across the globe. We also recognise that many of the issues that surround the debate in the UK and Europe, such as immigration, free trade and reciprocal health benefits are reflected in political events in many other countries. The policies of the Trump administration in the US and the movement for Catalan independence from Spain, as just two examples, will raise similar issues. As with Britain’s decision to leave the EU, health care may not be the main focus, but political events such as these will surely effect the delivery of health services, potentially in quite profound ways.

The impact of Brexit on nurse migration is just one example of its potential consequences. Between May 2016 (a month before the UK’s referendum in June 2016) and May 2017, applications from EU nurses to join the UK’s nursing register dropped by 92% from over 1000 per month to fewer than 100 at a time when some sources estimate that the NHS has an estimated 40,000 registered nurse vacancies in England alone (Helm & Bungeroth 2017). This is seen by “Remainers” as disastrous for the UK – but by “Leavers” as a positive opportunity to encourage a higher proportion of British people to enter the profession and to end a long term reliance on importing nurses to address the consequence of workforce planning failures.

However, issues around the opportunities and challenges from deploying migrant nurses in the workforce are not unique to the UK. A quick scan of research articles published in the *International Journal of Nursing Studies* over the past few years demonstrates that migration of nurses is a global issue with studies of language competence (e.g. Müller 2016; Hull 2016; Clayton, Isaacs, and Ellender 2016; Rumsey et al. 2016; Zhong, McKenna, and Copnell 2017) and the motivations and experiences of migrant nurses (e.g. Zhou, Roscigno, and Sun 2016; Garner, Conroy, and Bader 2015; Johnson, Green, and Maben 2014; Zhong, McKenna, and Copnell 2017) adding to a significant body of research relating to the health experiences of other migrant workers (e.g. Drewniak, Krones, and Wild 2017; Nortvedt et al. 2016; Schwei et al. 2016).

McCrae's editorial cites a research study (Germack et al. 2015) that illustrates both sides of the argument in so far as it shows the challenges of deploying a migrant workforce while, illustrating the benefits of cross border research and supra-national funding in the field of scientific research. Other results from the same study, which arose from a pan-European study funded by the EU, show the fundamental importance of maintaining an adequate supply of registered nurses by illustrating the impact of insufficient registered nurses on patient safety (Ball et al. in press). While the UK has relied heavily on migrant nurses to maintain numbers, prompting fears for the ability of the UK to recruit nurses after Brexit, the Japan-Philippines Economic Partnership is an example of an international treaty where an expected increase in migration, with the potential to address Japan's shortage of health care workers, failed to materialise (Yagi et al. 2014; Yujuico 2015).

By publishing these two editorials, which present very different perspectives on the impact and implications of Brexit for nursing, we hope to start a debate about the consequences of Brexit for healthcare and the health care workforce and the implications of the issues raised for global health. Both these editorials set the consequences of Brexit for nursing in the context of its implications more generally but emphasise its impact on the UK. We would like to broaden the debate by encouraging responses to the editorials, particularly from readers outside the UK, so that the debate charts the wider implications of Brexit for the nursing and midwifery professions.

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Professor Peter Griffiths
Faculty of Health Sciences,
University of Southampton,
Southampton, UK

&

Professor Ian Norman
Faculty of Nursing, Midwifery & Palliative Care
King's College London,
LONDON, UK